



Northampton Parks & Recreation Youth Hoop League Grades K-6

Northampton Public Schools do not endorse, supervise, or participate in the organization distributing this literature.

Please check our website for separate Pre-K Parent & Child program and the 7/8 grade program

Pre-Season Clinics and Evaluations: For boys divisions 3/4 and 5/6, and girls 1-3 and 4-6. These fun practices and clinics begin Nov. 7 through Nov. 19. They will consist of drills and scrimmages to kick off the basketball season, and to help the configuration of teams. **Players should attend at least 3 out of the 4 sessions scheduled for their division. Girls 1-3 should attend 1 of the 2 sessions scheduled. Pre-Season Clinic Schedule:** Available at www.northamptonma.gov/recreation/youth_programs/basketball or at our office.

Hamp Parks & Rec Hoop Registration Form-grades K –6

1. Child's Name—first & last	Gender M/F	Date of Birth	Age	Grade	School

2. Child's Name—first & last	Gender M/F	Date of Birth	Age	Grade	School

PARENT/GUARDIAN	Parent 1/Guardian	Parent 2/Guardian (complete if any field is different)
First & Last Name		
Street Address		
City or Town		
Zip Code		
Home Phone #		
Mobile Phone #		
Work Phone #		
Email Address		
Emergency Phone #		

- Did your child play in the league last year? No ____ Yes ____
- Where did you hear about this program?
Played last year ____ Program guide ____ Rec. web site ____ Email newsletter: ____ Other ____

Boys Divisions

Grades 1 & 2: \$47

Grades 3 & 4: \$58

Grades 5 & 6: \$58

Girls Divisions

Grades 1,2,3: \$47

Grades 4,5,6: \$58

Coed Kindergarten Division: \$47

Add \$5 late fee each player after Nov. 14

Non-residents add \$10 per player



Child 1 Fee: \$_____ Child 2 Fee: \$_____ Non-res/late fees: \$_____ Total \$_____

For additional children, attach another form.

Checks payable to City of Northampton

Mail or drop off registration to Northampton Parks & Recreation, Locust St., Northampton, MA 01060

Charge my: Visa ____ Master Card ____ Discover ____ Card Number _____ Exp. Date: _____

Cardholders Name: _____ Signature: _____



***** COACHES ***:** We need coaches/assistant coaches! TRAINING PROVIDED! Clinics are scheduled for the middle of November. If you would like to be part of this program, please sign below. We also need coaches to help with pre-season player clinics and evaluations. Please contact Kathy at 587-1040, kweston@northamptonma.gov.

Name of person wishing to coach: _____ Phone: (h) _____ (cell/work) _____

Email Address: _____

For Office use only: Eval Schedule Given _____ Amt. Received \$ _____ Date _____ Staff _____ RT Entered Date _____ By Staff _____